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MBS/PAQ  
April 8, 2008



1FW  
PATENT APPLICATION  
DOCKET NO. 2376.2009-000

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants: David W. Jenkins and Mark A. Bremner

Application No.: 10/738,911

Group: 2619

Filed: December 17, 2003

Examiner: Mounir Moutaouakil

Confirmation No: 8354

For: METHOD AND APPARATUS FOR ADDING DIGITAL CROSS  
CONNECT CAPACITY

|   |  |
|---|--|
| <b>CERTIFICATE OF MAILING OR TRANSMISSION</b>   |  |
| I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as First Class Mail in an envelope addressed to Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, or is being facsimile transmitted to the United States Patent and Trademark Office on: |  |
| <u>4/9/08</u><br>Date   | <u><i>Anne Amison</i></u><br>Signature |
| <u>Anne Amison</u><br>Typed or printed name of person signing certificate   |  |

Mail Stop Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an Amendment for filing in the above-identified application.

- ☐ Small entity status of this application under 37 CFR 1.9 and 1.27 has been established by a Small Entity Statement previously submitted.
- ☐ A Small Entity Statement to establish small entity status under 37 CFR 1.9 and 1.27 is enclosed.

04/14/2008 HDEMESS1 00000032 10738911

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210.00 0P

The claims fee has been calculated as shown below:

|  |                                  |       |                                 |               | SMALL ENTITY |            | OTHER THAN SMALL ENTITY |                |            |
|--|----------------------------------|-------|---------------------------------|---------------|--------------|------------|-------------------------|----------------|------------|
|  | CLAIMS REMAINING AFTER AMENDMENT |       | HIGHEST NO. PREVIOUSLY PAID FOR | PRESENT EXTRA | RATE         | ADDIT. FEE | OR                      | RATE           | ADDIT. FEE |
| TOTAL  | 20                               | MINUS | * 20                            | 0             | X \$ 25      | \$         |                         | X 50           | \$ 0       |
| INDEP  | 4                                | MINUS | ** 3                            | 1             | X \$105      | \$         |                         | X \$210        | \$ 210     |
| <input type="checkbox"/> FIRST PRESENTATION OF MULTIPLE DEP. CLAIM |                                  |       |                                 |               | +            | \$185      | \$                      | +              | \$370      |
|  |                                  |       |                                 |               | TOTAL = \$ 0 |            |                         | TOTAL = \$ 210 |            |

\* not fewer than 20  
 \*\* not fewer than 3

The Application Size Fee has been calculated as shown below:

(Effective for cases filed on or after December 8, 2004)

| Actual Sheets (Including current amendment) | Highest No. of Sheets Paid For (At least 100) | No. of Additional Units Required (Increments of 50 sheets) | SMALL ENTITY |                   | OTHER THAN SMALL ENTITY |                   | Payment Sufficient for up to<br>[ ] Sheets |
|---|---|--|--------------|-------------------|-------------------------|-------------------|--|
|   |   |  | Rate         | Total Amount Owed | Rate                    | Total Amount Owed |  |
|   |   |  | X \$130      | \$[ ]             | X \$260                 | \$[ ]             |  |

### Petition for Extension of Time

- ☒ Applicant hereby petitions to extend the time to respond to the Office Action dated December 10, 2007, for 1 month from March 10, 2008 to April 10, 2008. The appropriate fee is set forth below.

**Please charge Deposit Account No. 08-0380 for the following fees:**

|                          |   |    |       |
|--------------------------|---|----|-------|
| <input type="checkbox"/> | Petition for [    ] month Extension of Time | \$ | _____ |
| <input type="checkbox"/> | Claims Fee                                  | \$ | _____ |
| <input type="checkbox"/> | Application Size Fee                        | \$ | _____ |
| <input type="checkbox"/> | Other Fees:                                 | \$ | _____ |
|                          |   | \$ | _____ |
|                          |   | \$ | _____ |
| TOTAL:                   |   | \$ | _____ |

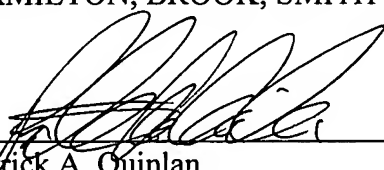
**A check is enclosed in payment of the following fees:**

|                                     |  |    |       |
|-------------------------------------|--|----|-------|
| <input checked="" type="checkbox"/> | Petition for 1 month Extension of Time | \$ | 120   |
| <input checked="" type="checkbox"/> | Claims Fee                             | \$ | 210   |
| <input type="checkbox"/>            | Application Size Fee                   | \$ | _____ |
| <input type="checkbox"/>            | Other Fees:                            | \$ | _____ |
|                                     |  | \$ | _____ |
|                                     |  | \$ | _____ |
| TOTAL:                              |  | \$ | 330   |

- ☒ Please charge any deficiency or credit any overpayment in the fees that may be due in this matter to Deposit Account No. 08-0380. If this submission is in paper form, a copy of this letter is enclosed for accounting purposes.

Respectfully submitted,

HAMILTON, BROOK, SMITH & REYNOLDS, P.C.

By   
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Dated: 